

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS           | ID N  | DATE        |
|---------------------|--------------------|-------|-------------|
| FEE DETERMINATION   | <i>[Signature]</i> | 69861 | 8/19        |
| O.I.P.E. CLASSIFIER |                    | 25    | 8-24-95     |
| FORMALITY REVIEW    |                    | 61601 | 9/3<br>10/8 |

INDEX OF CLAIMS

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 (Through numeral)... Canceled A ..... Appeal  
 Restricted O ..... Objected

| Claim | Final | Original | Date |
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2 AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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